

FOR APCP USE ONLY			
DATE RECEIVED	CHECK DATE		
CHECK NUMBER	CHECK AMOUNT		

GENERAL INSTRUCTIONS

Asbestos occupation certification (except for Air Sampling Professional) expires one year from its effective date unless it is renewed annually. For certification renewal, Missouri Air Conservation Law, Chapter 643 RSMo and Missouri state rule, 10 CSR 10-6.250 require the individual shall successfully complete a Missouri state approved annual refresher course and examination. The individual shall score at least 70 percent on the refresher course examination. The refresher course shall be specific to the certification for which the individual initially received training. In addition, the refresher course shall meet the requirements of the U.S. Environmental Protection Agency (EPA) Asbestos Hazard Emergency Response Act (AHERA) Model Accreditation Plan, 40 CFR Part 763. The individual shall complete the Certification Renewal Form(s) (one form per occupation), submit refresher training course certificate(s), and submit a renewal fee of \$5 per renewal category to the address below. In the case of significant changes to the Missouri Asbestos statutes or regulations, the applicant must also take and pass, with a score of at least 70 percent, a revised Missouri State Asbestos Examination. If this test is required, a twenty-five dollar (\$25) Missouri State Asbestos Exam Fee must also be submitted with this application. The individual will be recertified when all fees and information required in this form have been submitted and reviewed and written verification of recertification has been received from the director.

MISSOURI DEPARTMENT OF NATURAL RESOURCES AIR POLLUTION CONTROL PROGRAM (ASBESTOS)

P.O. Box 176

	Jelierson Cit	y, MISSOUTI 65102		
PART A AUTHENTICATION				
1. NAME OF APPLICANT (PRINT)		2. SOCIAL SECURITY NUMBER		
3. HOME ADDRESS (STREET/APARTMENT)				
CITY		STATE	ZIP	
3. TELEPHONE NUMBER		5. PRESENT MISSOURI CERTIFICATE NUMBER		
6. PRESENT EMPLOYER				
7. EMPLOYER'S ADDRESS				
CITY		STATE	ZIP	
8. EMPLOYER'S TELEPHONE NUMBER		9. PLEASE INDICATE WHICH ADDRESS YOU WOULD LIKE US	SED AS YOUR CONTRACT ADDRESS	
		☐ Home Address ☐ Employer's Add	dress	
10. OCCUPATION CATEGORY TO BE RENEWED (CHECK ONLY O	ONE PER RENEWAL APPLICATION	ON)		
Discipline	Renewal Fee	Missouri Exam Fee (if applicable)*		
Worker	\$5.00	\$25.00		
Supervisor	\$5.00	\$25.00		
Project Designer	\$5.00	\$25.00		
Inspector	\$5.00	\$25.00		
Management Planner	\$5.00	\$25.00		
*The Missouri State Asbestos Exam is only required to be taken by individuals seeking recertification when there are significant changes to the Missouri asbestos statutes or regulations. This test is in addition to the course specific test. If you are required to take the Missouri State Asbestos Exam you must submit the twenty-five dollar (\$25) fee. If you are not required to take the Missouri State Asbestos Exam, do not submit this fee. Failure to submit the correct fees will delay the processing of your application.				
11. I HEREBY CERTIFY THAT ALL OF THE INFORMATION PROVIDED IN THIS APPLICATION IS COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE. I FURTHER CERTIFY THAT I WILL COMPLY WITH REQUIREMENTS OF MISSOURI AIR CONSERVATION LAW, CHAPTER 643 RSMO AND MISSOURI STATE RULE 10 CSR 10-6.250.				
SIGNATURE OF APPLICANT		DATE		
PART B TRAINING		<u> </u>		
NOTE ► Attach a copy of your refresher training certificate from a Missouri Accredited Training Provider.				
	ed on this application (changes, please notify the department in writir	ng of the change within 30	
days.				

PART C SUPPLEMENTAL INFORMATION		
PART LETTER	SUBPART NUMBER	PAGE NUMBER
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